SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT



Bayfield Co. Zoning Dept.

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Refund:	Amount Paid:	Date:	Permit #:
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INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED	QUESTED→	E-LAND USE	□ SANI	SANITARY   PR	۱   <del>3</del>	CONDITIONAL USE City/State/	Zip: □ S	SPECIAL USE	□ B.O.A.	<u>A.</u> □ OTHER Telephone:	THER
Address of Property:	Jann K	Sue to	thener	City/State/Zip:	taur	Carnery Mi	Mass lu	612.	<u> </u>	Cell Phone:	) }
557% E	Ex Conts	Story 6	5	Mason	33	258356				,	2
_	Construction	ζ 		Contractor Phone:	ine:	Plumber:				Plumber Phone:	hone:
	rson Signing Applic	ation on behalf		Agent Phone: 715 209	-(52)	Agent Mailing Address (include 32985 W. Stait H. H.	' % ^	City/State/Zip):		Written A Attached	Written Authorization Attached Ø Yes ☐ No
	Legal Description:		(Use Tax Statement)	PIN: (23 digits) 04- っろの-フーダら	7.50-0	-2 02 Cco / CCO 0	800	Recorded Docum Volume <i>し</i> つうり	Document	:: (i.e. Property Page(s)	Recorded Document: (i.e. Property Ownership) Volume 1054 Page(s) 753
<u>ν(νν 1/4, _)</u>	\J\v\\ 1/4	Gov't Lot	.ot Lot(s)	CSM		Lat(s) No.	Block(s) No.	Subdivision	on:		
Section 13	, Township	35	N, Range	W	Town of:	(.		Lot Size		Acreage	8
	☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodplain?	/Land within dward side of	Is Property/Land within 300 feet of River, Stream (ind. Intermittent) reek or Landward side of Floodplain? If yescontinue	Stream (incl. Interm	d. Intermittent)	Distance Structure	ture is from Shoreline :	reline :	ls Property in Floodplain Zone?	ls Property in oodplain Zone?	Are Wetlands Present?
☐ Shoreland —	☐ Is Property,	/Land within	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	s, Pond or Flowage If yescontinue	lowage ntinue —▶	Distance Structure	ture is from Shoreline :	reline : feet	<b>A</b> D LJ	] Yes €_No	% Yes □ No
Non-Shoreland											
Value at Time of Completion * include donated time &	Project	St.	# of Stories and/or basement	ent	Use	# of bedrooms	Sew	What Type of wer/Sanitary Syste Is on the property?	What Type of Sewer/Sanitary System Is on the property?		Water
and the control of th	New Construction	ruction	☐ 1-Story		Seasonal	□ <b>1</b>					□ City
<u>)</u>	☐ Addition/Alteration	Uteration	☐ 1-Story + Loft	<u> </u>	X Year Round	2	☐ (New) Sanitary	tary Spec	Specify Type:	7	+
7	☐ Conversion ☐ Relocate (existing bidg)	xisting bldg)	☐ Basement				☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	or J Va	ulted (mir	200 gallo	2   -
	Run a Business on	ness on	X. No Basement	nt		▼ None	Portable (w/service contract)	//service co	ontract)		***************************************
			1 1				1 1				
Existing Structure: (if permit being applied for is relevant to it)	(if permit beir	ng applied for	is relevant to it)	Length:	)				# # H		*
Proposed Construction:	ction:			Length:	\ \\\		Width: 3		He	Height:	6
Proposed Use	~			Propo	Proposed Structure	e			Dimensions	ड	Square Footage
		Principal S Residence	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.)	structure c	n property) , etc.)				×	<u> </u>	
	1 1		with Loft						×	-   -	
X Residential Ose	Se		with a Porch	ch					×	_ -	***************************************
			with a Deck		The state of the s				×	_	
		and the second	with (2 <sup>nd</sup> ) Deck	<del>X</del>					: ×	-   -	And
Commercial Use	T		with Attached Garage					-	< ×	-	
		Bunkhous	Mobile Home (manufactured date)		ping quarters,	sleeping quarters, or _   cooking & tood prep facilities,	rood prep raciliti	es)	×   >	_ -	
	-	Addition/	Addition/Alteration (specify)	cify)	**************************************			<u> </u>	×	_	i de frequencia
☐ Municipal Use	L/I	Accessory Building	[	(specify) Pole	30:1	ding		. 136	×	(hS	HHD
		Accessory	Accessory Building Addition/Alteration (specify)	on/Altera	tion (specify)		L. L	-	×	_	
Rec'd for Issuan	suance	Special Us	Special Use: (explain)		And the principal of the last				×	_	
Z 	3	Condition	Conditional Use: (explain)	######################################		Marin Springer	1111		×	_	Anthropia bare w
þ		Other: (explain)	plain)					_	>	,	

Authorized Agent: Owner(s): (If there are Multiple FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES and accuracy of all information) has been examined by me (u.s.) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. Δ (If you signing on behalf of the owner(s) a letter of authorization must accompany this application) ust sign <u>or</u> letter(s) of authorization must accompany this application) Date Date

Address to send permit

55790

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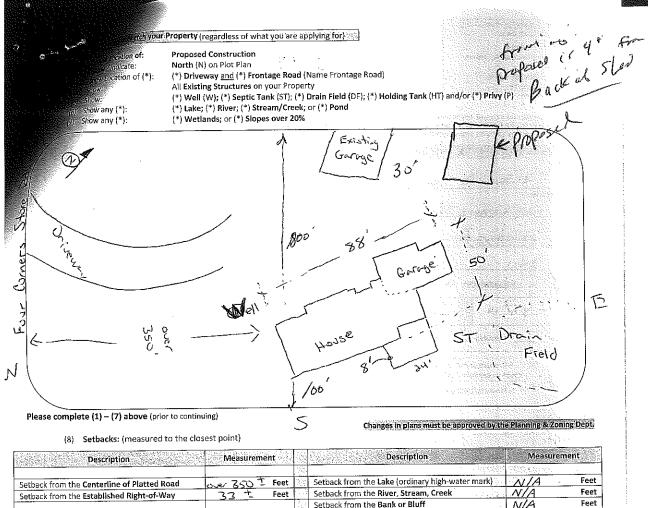
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Massan Massan

 $\frac{54855}{1}$  Copy of Tax Statement If you recently purchased the property send your Recorded Deed

Hold For Sanitary: Hold For TBA:		Inspection: 5 (LL) Son(s): Town, Committee or Board Conditions Attach	Awily S	Was Proposed Building Site Delineated (YYes □ No	Granted by Variance (B.O.A.) ☐ Yes YNo Case #:	Is Parcel a Sub-Standard Lot	Permit #. 15.0(3) Permi	Issuance Information (County Use Only)  Permit Denied (Date): Reaso	(9) Stake or Mark Proposed Location(s) of NOTICE: All Land Use Permits Expire For The Construction Of New One & Two Fan The local Town, Ville	other previously surveyed corner or marked by a licensed surveyor at the owner's expense, and by the rection of the previously surveyed corner or marked by a licensed surveyor at the owner's expense, and the property of the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proportional by a licensed surveyor at the owner's expense.	1016000	Setback to Septic Tank or Holding Tank		Setback from the <b>North</b> Lot Line 1/0 Setback from the <b>South</b> Lot Line 150	it-of-Way	from the Centerline of Platted Road	Description	Please complete (1) – (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point)	See etta	(1) Show Location of: (2) Show Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show: (6) Show any (*): (7) Show any (*): (*) Driveway and (*) Frontage Road (Name Front Kill (N); (*) Septic Tank (ST); (*) Drain Field (*) Show: (*) Well (W); (*) Septic Tank (ST); (*) Pond (*) Frontage Road (Name Front Kill (N); (*) Septic Tank (ST); (*) Drain Field (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%
Hold For Affidavit: Hold For Fees:		Inspected by: Solomon (If No they need to be attached.)		Were Property Lines Represented by Owner Was Property Surveyed	Previously Granted by Variance (B.O.A.) □ Yes ☑ No C	ENO MIT	Permit Date: 5/2/5	Sanitary Number: # of bedrooms: Reason for Denial:	Iction, Septic Tank (ST), Drain ar from the Date of Issuance if Community Municipalities Are Requirate or Federal agencies may als	nset, in required sectors, the political y line from which one sectors, has be measured incenses. The free sectors of the minimum required setback, the boundary line from which the Department by use of a corrected compass from a known corner within 500 feet.	Feet Feet Feet Feet Feet Feet Feet Feet	Feet Setback to Well	Feet Feet			Setback from the Lake (ordinary	Measurement Description	Changes in plans must be approved	hed	roperty (regardless of what you are applying for)  Proposed Construction  North (N) on Plot Plan  (*) Driveway and (*) Frontage Road (Name Frontage Road)  All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*)  (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  (*) Wetlands; or (*) Slopes over 20%
- S-W-75	Date of Appropriate	Date of Re-Inspection:	Zoning District (1961)  Lakes Classification (1961)	□ Yes □ Yes	Case #	Affidavit Required ☐ Yes ☑No Affidavit Attached ☐ Yes ☑No		Sanitary Date:	Pri gun. vellir	the setback must be measured must be visible from of the proposed site of the structure, or must be	the vicible from one available to prove the the	(75 ≠ Feet	√/A→ Feet		MA Feet	mark) N/S	Measurement	pproved by the Planning & Zoning Dept.		nd/or (*) <b>Prîvy</b> (P)



Description	Measureme	nt	1	Description	Measurement
SAN 1967 J. T. (S. ). A STATE OF A			13/2		Property of the second
Setback from the Centerline of Platted Road	over 350 F	Feet	13.5	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	33 ±	Feet		Setback from the River, Stream, Creek	N/A Feet
			34	Setback from the Bank or Bluff	N/A Feet
Setback from the North Lot Line	18W +-	Feet	ψ.		
Setback from the South Lot Line	100	Feet	Tran	Setback from Wetland	N/AV Feet
Setback from the West Lot Line		Feet	- 3	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	800 +-	Feet		Elevation of Floodplain	V/A Feet
			1.9		
Setback to Septic Tank or Holding Tank	15	Feet	1	Setback to Well	15 Feet
Setback to Drain Field	75	Feet	40		
Setback to Privy (Portable, Composting)		Feet	3.	day like from which the cothock must be married must be visible from one	<u> </u>

Prior to the placement or construction of a structure within ten (III) fact of the minimum required sotback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other compared to the contraction and the contraction of the measured must be weakly like and the source of the compared to the other contraction of the contraction of

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a fixensed surveyor at the owner's expense.

## (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	'-//S	# of bedrooms: 3	Sanitary Date: 428-//
Permit Denied (Date):	Reason for Denial:	•		
Permit #: 10 -0056	Permit Date: 4/-/	3- <i> </i> 2	1. 2. at at a to	
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes	· · · · · · · · · · · · · · · · · · ·	Mitigation Required Mitigation Attached		Affidavit Required ☐ Yes ØNo Affidavit Attached ☐ Yes ØNo
Granted by Variance (B.O.A.)  ☐ Yes   ☐ Yes  ☐ Case #:	• •	Previously Granted b	y Variance (B.O.A.) Case	
Was Parcel Legally Created	THE STREET STREET	Were Property Line	es Represented by Owner Was Property Surveyed	
inspection Record: Well staked, Meets all 2	retbacks.			Zoning District ( ) ( ) Lakes Classification ( W )
Date of Inspection: 4-3-/2	Inspected by:	Furtale		Date of Re-Inspection:
Condition(s):Town, Committee or Board Conditions Atta	ched? U Yes II No -(if)	<u>No</u> they need to be atta	ched.)	
See TBA				
		1	10 mg/mm	
Signature of Inspector: Machael due	tob.	Jan State Control		Date of Approval:
Hold For Sanitary:  Hold For TBA:	1 12 12 Hold For Affic	lavit: 🛛	Hold For Fees:	

SUBMIT: COMPLETED APPLICATION, STATEMENT AND FEE TO: Bayfield County
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PO Box 58
Washburn, WI 54891
(715) 373-6138

> BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT

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ENTERED 75 Permit #: Date: Amount Paid:

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Bayfield Co. Zoning Dept.

Refund:

MAY 042015

<b>▼</b> Non-Shoreland	☐ Shoreland — ☐ Is Prope	0 🗆	Section 3/ , Township	NE 1/4, NE 1/4	PROJECT Legal Des	Authorized Agent: (Perssel Signing Application on behalf of Owner(s))	Contractor: Self	25880 With House Road	Sight Repto	TYPE OF PERMIT REQUESTED—► ☐ LAND USE
***************************************	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)  Creek or Landward side of Floodplain? If yescontinue —▶	ship 45 N, Range 5	Gov't Lot Lot(s)	Legal Description: (Use Tax Statement)	Application on behalf of Owner(s))		Road 25885		→ □ LAND USE □ SAN
	ke, Pond or Flowage If yescontinue	er, Stream (incl. Intermittent)  If yescontinue	_ W Town of:	CSM Vol & Page	030-24-05-03-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Agent Phone:	Contractor Phone:	City/State/Zip: MuSS/1, W/1 5	Mailing Address:	☐ SANITARY ☐ PRIVY ☐
	Distance Structure is from Shoreline :	Distance Structure is from Shoreline:	Lincoln	Lot(s) No. Block(s) No.	01-000 10000	Agent Mailing Address (include City/State/Zip):	Plumber:	54836	Muson, WI 54856	☐ CONDITIONAL USE ☐ SPEC
	#	#	Lot Size	Subdivision:	Recorded Documen	State/Zip):			54856	☐ SPECIAL USE ☐ B.O.A.
	☐ Yes ☐ Yes	Is Property in Are Wetlands Floodplain Zone? Present?	Acreage		Page(s) 7/6	Written Authorization Attached Pes No	Plumber Phone:	Cell Phone:	Telephone: (7/5)+12-5682	A DOTHER

Existing Structure: (If perproposed Construction:			ĺ	(S)	n.		Value at Time of Completion * include donated time & material
Existing Structure: (if permit being applied for is relevant to it) Proposed Construction:	Property	Run a Business on	Relocate (existing bldg)	☐ Conversion	$\square$ Addition/Alteration	New Construction     ■ New Construct	Project
r is relevant to it)	☐ Foundation	☐ No Basement	□ Basement	☐ 2-Story	☐ 1-Story + Loft	A 1-Story	# of Stories and/or basement
Length:						☐ Seasonal	Use
		None		ω	□ 2	 1	# of bedrooms
Width: 3→ Height: 16		☐ Portable (w/service contract)	Frivy (Pit) or Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
		<u> </u>			& Well	□ City	Water

Proposed Use	`	Proposed Structure	Din	Dimensions	Square Footage
		Principal Structure (first structure on property)		× )	
		Residence (i.e. cabin, hunting shack, etc.)	(	х )	
		with Loft	_	× )	
Residential Use		with a Porch	(	х )	
		with (2 <sup>nd</sup> ) Porch	(	x )	
		with a Deck	(	× )	
		with (2 <sup>nd</sup> ) Deck	(	х )	
☐ Commercial Use		with Attached Garage	_	× )	
		<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	(	× )	
		Wobile Home (manufactured date)		×	
		Addition/Alteration (specify)	^	X )	
Municipal Use	À	Accessory Building (specify) Pole Basa	20	× 32)	640
And the state of t		Accessory Building Addition/Alteration (specify)	_	× )	(
Rec'd for Issuance					
		Special Use: (explain)	^	х )	
		Conditional Use: (explain)		X )	
		Other: (explain)		×	
UBIC IPUPIAIDAC					

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknow am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) truther accuracy be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to I believe the property at any reasonable time for the purpose of inspection. redge that I (we)
pt liability which
re access to the 3

Authorized Agent:

Owner(s): (If there

are Multiple

listed on the Deed All Owners

must sign or letter(s) of authorization must accompany this application)

Address to send permit (If you are signing on behalf of the owner(s) a letter of authorization must accompany this 70 (2) (2) -U MASON

SH8SL application)

Date

Date

2 Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

H <sub>O</sub> L	<u>S</u>	Range (St. 18	റ	ь		STATE OF	⊟ ഒ		P	P 2		ma	9 F. E	P S	S S	Š	N N N	2	ပ္သည္					
ld For S	Signature		ndition	ate of in	spection	Nas Pro	anted b	Is Par Parcel I Is Stru	Permit #:	suance rmit De		ked by a li	other previous Prior to the pla one previously	tback to	tback to	tback fr	tback fr	thack f	Setback fr Setback fr		Please			13:
nitarv.	of Inspect		(s):Town	Didy Stal	Inspection Record:	Was posed Bi	y Varian <b>No</b>	cel a Sul n Comm cture No	15	Issuance Informa Permit Denied (Date):		censed sun	ly surveyed or surveyed	Privy (	Septic Drain	om the	om the	+	om the		(8)		ammery	(1) (2) (3) (4) (5) (6)
9	1		Committe	1 E		Parcel L Jiding S	Granted by Variance (B.O.A.)  ☐ Yes ≦ No	Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	7	natior te):	For Th	arked by a licensed surveyor at the owner  (9) Stake or Mi	constructi	Portabl	Tank o	East Lo	South I	Now+h i	Center	Descr	te (1) - Setbac			Show Location Show / Indicat Show Location Show: Show: Show any (*): Show any (*):
	2		ttee or I			Was Parcel Legally Created Was Proposed Building Site Delineated	ို ရ	ard Lot ership orming		(Cour	NOTIC e Constr	e owner's e	marked by on of a stru ne other pr	Setback to <b>Privy</b> (Portable, Composting) Prior to the placement or construction of a structure with	Setback to Septic Tank or Holding Tank Setback to Drain Field	t Line	Setback from the <b>West</b> Lot Line	) 	ine of P shed Rig	Description	(7) aba			Show Location of: Show / Indicate: Show Location of (*): Show: Show: Show any (*): Show any (*):
Hold For			Condition(s):Town, Committee or Board Conditions Attached?	انع ﴿				□ Yes		Issuance Information (County Use Permit Denied (Date):	E: All La	ner's expense Mark Propo	a licensed icture more eviously su	o Privy (Portable, Composting) acement or construction of a structure within t	g Tank				from the Centerline of Platted Road from the Established Right-of-Way		Please complete (1) - (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point)	Se Hart		of: of (*):
TRA.	3		nditions	8	<del>9-</del> :	N Yes		(Deed of Record) (Fused/Contiguo		Only)	nd Use I f New O The lo	sed Loc	surveyor a than ten i	in ten (10)					toad ay		to the	The state of the s		Prop. (*) L. (*)
			Attache	Dalca >		N O		(Deed of Record) (Fused/Contiguous Lot(s))			ermits I ne & Tw	ation(s	t the owne (10) feet bu ner, or veri	feet of the							itinuing) closest			th (N) or th (N) or th (N) or th (N) or the th (N) or the
			ď?	) Inspect(				s Lot(s))	Permit Date:	Sanitary Number: Reason for Denial:	expire O	eyor at the owner's expense	r's expense t less than fiable by th	ten (10) feet of the minimum requ	2 /S	800	25/25/25	֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	250	Measu	point)			onstruction n Plot Plan y and (*) Fr Structures o ); (*) Septic River; (*) S s; or (*) Slo
Hold F			res I	A P		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				or Denia	ne (1) Ye Dwellin	v Consti	thirty (30) i e Departm	equired						Measurement				ion an Fronta es on yo otic Tan *) Strea Slopes
ır Affidaı			ed? Tes INo (If No they need to be attached.)	-				N S S	7.		NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	uction,	eet from the	Feet setback, the b	Feet	Feet	Feet	1	Feet					Proposed Construction North (N) on Plot Plan  (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  (*) Wetlands; or (*) Slopes over 20%
/it·			they ne			Were	Previou    Yes	Mitigat	25		the Date funicipa	Septic T	ie minimur of a correct	oundary lir	Setb	Eleva	Setba	Setb	Setb	100				! (Name erty   Drain   k; or (*)
			ed to be			Were Property Lines	Previously Granted by ☐ <b>Yes 図 No</b>	Mitigation Required Mitigation Attached			of Issua Ities Are gencies r	ank (ST)	n required : ed compas	undary line from which the setback must be measured must be visible from one prev	Setback to Well	ation of	Setback from Wetland  20% Slope Area on property	Setback from the Bank or Bluff	Setback from the Lake (ordinary Setback from the River, Stream,					Frontag Field (C Pond
T.			attache			y Lines i		hed			nce if Co Require	, Drain 1	setback, thi s from a kn	ich the setk	/ell	of Floodplain	Wetland	1 the Ba	the La		Chang			ge Road IF); (*) H
d For Fe			d.)			Represented by Owner Was Property Surveyed	Variance	□Yes		or pearooms:	nstructí id To End require	ield (DF	e boundary	ack must b		ain	nd	nk or B	ke (ordi /er, Stre	Description	Changes in plans must be approve			lolding.
, .						nted by o perty Sun	(B.O.A.)	No No		oms:	on or Us force Th	), Holdi	line from within 500	be measure			7		nary hig	tion	ins must			Tank (H
						Owner veyed	Case #:				e has no	ng Tank	which the s ) feet of th	d must be					high-water m Creek		be appr			T) and/
	Da			Date of	Zoning District	□ Yes		Affidavit Required Affidavit Attached		Sanitai	nt begun	(HT), Pı	etback mu e proposed	visible from					r mark)		oved by			or (*) <b>Pr</b>
	te of Ap			f Re-ins	ing District (			Require Attache		mary Date:	ing Code	rivy (P),	st be meas I site of the								the Pla			(*) <b>Privy</b> (P)
	Date of Approval:S//3//5			Date of Re-Inspection:								Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).	other previously surveyed corner or marked by a licensed surveyor at the owner's expense.  Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be	ously surveyed corner to the	ō	<u>ح</u>	Yes V/A	5	22	Meası	d by the Planning & Zoning Dept.			
	1/3/							Yes ■				# (¥)	be vísible fi or must be	yed corner	, V.			12	P	Measurement	Zoning			
	$ \mathcal{S} $					N O		8 8					wo,	to the	Feet	Feet	M Feet	Feet	Feet	T	Đ.			

box below: Draw or Sketch your Property (regardless of what you are applying for)



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